



State of Washington SEP 24 1997

Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use

Fee Paid \$22.00

Date 9-15-97

ck #23138

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name Thomas R. Buchholtz Home Tel: ( ) -  
(Dept. of Natural Resources)  
Mailing Address 713 E. Bowers Rd. Work Tel: (509) 925 - 0935  
City Ellensburg State WA Zip +4 98926 + 9341 FAX: (509) 925 - 8522

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☒ Same as above

Name THOMAS R. Buchholtz Home Tel: ( ) -  
Mailing Address Work Tel: ( ) -  
City State Zip +4 + FAX: ( ) -  
Relationship to applicant

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than (4800 gpm) ( ☒ gallons per minute or  
☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the  
purpose(s) of Irrigating crops. ATTACH A "LEGAL"  
DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is  
not sufficient. (SEASONAL IRRIGATION OF 640 ACRES)  
Estimate a maximum annual quantity to be used in acre-feet per year: 1920

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be  
needed:  
From / / to / /

Section 4. WATER SOURCE

If SURFACE WATER					If GROUNDWATER			
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:					A permit is desired for <u>4</u> well(s).			
Number of diversions:					Size & depth of well(s): <u>16" diameter - up to 1500' deep</u>			
Source flows into (name of body of water):								
LOCATION								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: 1. 1300' South & 1300' East of the NW corner of Sec. 16, T. 9N., R. 31E. 2. 1300' South & 1300' West of the NE corner of Sec. 16, T. 9N., R. 31E. 3. 1300' North & 1300' East of the SW corner of Sec. 16, T. 9N., R. 31E. 4. 1300' North & 1300' West of the SE corner of Sec. 16, T. 9N., R. 31E.								
¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
1. NW	NW	16	9	31	Franklin			
2. NE	NE	16	9	31	"			
3. SW	SW	16	9	31	"			
4. SE	SE	16	9	31	"			
For Ecology Use Date Received: <u>9/24/97</u> Priority Date: <u>9-15-97</u>								
SEPA: Exempt/Not Exempt: <u>Exempt</u> FERC License # Dept. Of Health #								
Date Accepted As Complete <u>10/15/98</u> By <u>JK</u> Date Returned By WRIA: <u>33</u>								

ECY 040-1-14

Rev. 9/95 F

APPLICATION

Appl. No.:

6330079

Per phone conv. on 9/22/98, OKed under  
area in which to locate the 4 proposed wells  
since each well was proposed to be located w/in 20' of other ¼'s.  
OK.



## Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: N/A
- B. Briefly describe your proposed water system. (See instructions.)  
We propose to drill up to 4 wells, install pumps and irrigation systems to deliver irrigation water for up to 640 acres of irrigated crops.
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☒ NO  
PROVIDE DOCUMENTATION.

## Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: \_\_\_\_\_ Type of connection \_\_\_\_\_  
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☐ NO  
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

## Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 640
- B. List total number of acres for other specified agricultural uses:
- | Use | Acres |
|-----|-------|
| Use | Acres |
| Use | Acres |
- C. Total number of acres to be covered by this application: 640
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)  
Add up the acreage in which you have a controlling interest, including only:  
‡ Acreage irrigated under water rights acquired after December 8, 1977;  
‡ Acreage proposed to be irrigated under this application;  
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☐ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO  
If yes, enter permit no: \_\_\_\_\_
- E. Farm uses:  
Stockwater - Total # of animals \_\_\_\_\_ Animal type \_\_\_\_\_ (If dairy cattle, see below)  
Dairy - # Milking \_\_\_\_\_ # Non-milking \_\_\_\_\_

DNR Is Exempt

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APPLICATION



## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☒ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Provide detailed driving instructions to the project site.  
From Pasco travel on I-182 SE approximately 2.5 miles past the intersection with SR-395 to the Pasco/Kahlotus Road. Travel NE approximately 7 miles ~~to~~ on the Pasco/Kahlotus Road to the Martindale Road. Travel south approximately 2 1/2 miles on the Martindale Road to a major powerline. Travel NE approximately 1 1/2 miles along the powerline road to the site.

## Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

## Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used? ☒ YES ☐ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):


B. Does the applicant own the land on which the water source is located?

☒ YES ☐ NO

If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Thomas R. Buckholz P.E.  
Applicant (or authorized representative)  
for Dept. of Natural Resources

9-8-97  
Date

Same  
Landowner for place of use (if same as applicant, write "same")

Date \_\_\_\_\_

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## APPLICATION



Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

<b>SEPA</b>		<b>THIS APPLICATION IS NOT EXEMPT:</b>
LEAD AGENCY. _____		
<u>11/5/97</u>	Completed Checklist Received	
<u>1/1</u>	Termination of Nonsignificance Issued	
<u>1/1</u>	Determination of Significance Issued	
<b>DRAFT EIS ISSUED</b>	<u>1/1</u>	
<b>FINAL EIS ISSUED</b>	<u>1/1</u>	

We are returning your application for the following reason(s):	
____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ (date).	

Ecology staff \_\_\_\_\_ Date \_\_\_\_\_

**G-330079**

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).